

# Application for Employment

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for \_\_\_\_\_ Date of Application \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name \_\_\_\_\_  
 Last First MI

Address \_\_\_\_\_  
 Street City State Zip

Telephone # ( ) \_\_\_\_\_ Mobile/Beeper/Other # ( ) \_\_\_\_\_ Social Security # \_\_\_\_\_

If you are under 18, and it is required, can you furnish a work permit? ..... Yes \_\_\_ No \_\_\_

If no, please explain \_\_\_\_\_

Have you ever been employed here before? ..... Yes \_\_\_ No \_\_\_

Are you legally eligible for employment in this country? ..... Yes \_\_\_ No \_\_\_

Date Available to start work ..... / \_\_\_\_ / \_\_\_\_

Type of employment desired \_\_\_\_\_ Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Temporary

Are you able to meet the attendance requirements of the position? ..... Yes \_\_\_ No \_\_\_

Have you been convicted of a felony crime in the last seven (7) years? ..... Yes \_\_\_ No \_\_\_

If yes, please explain \_\_\_\_\_

CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT. EACH INSTANCE AND EXPLANATION WILL BE CONSIDERED IN RELATION TO THE POSITION FOR WHICH YOU ARE APPLYING.

Driver's license number if driving is an essential job function \_\_\_\_\_ State \_\_\_\_\_

## Employment History

Provide the following information for your past four (4) employers, assignments or volunteer activities, starting with the most recent.

FROM	TO	EMPLOYER	TELEPHONE
JOB TITLE		ADDRESS	
SUPERVISOR & TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED & JOB RESPONSIBILITIES	
REASON FOR LEAVING		HOURLY RATE/SALARY	START FINAL
FROM	TO	EMPLOYER	TELEPHONE
JOB TITLE		ADDRESS	
SUPERVISOR & TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED & JOB RESPONSIBILITIES	
REASON FOR LEAVING		HOURLY RATE/SALARY	START FINAL
FROM	TO	EMPLOYER	TELEPHONE
JOB TITLE		ADDRESS	
SUPERVISOR & TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED & JOB RESPONSIBILITIES	
REASON FOR LEAVING		HOURLY RATE/SALARY	START FINAL

FROM	TO	EMPLOYER	TELEPHONE
JOB TITLE		ADDRESS	
SUPERVISOR &	TITLE	SUMMARIZE THE NATURE OF WORK PERFORMED & JOB RESPONSIBILITIES	
REASON FOR LEAVING		HOURLY RATE/SALARY	START FINAL

### Skills and qualification

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying for.

### Education Background IF JOB RELATED

NAME & LOCATION	YEARS COMPLETED	DID YOU GRADUATE	COURSE OF STUDY
HIGH SCHOOL			
COLLEGE		MAJOR DEGREE	
OTHER			

### References

NAME	TELEPHONE	YEARS KNOWN

### In Case Of an Emergency, Please Contact

NAME	PHONE #	RELATION

I UNDERSTAND THAT IF I AM EMPLOYED, ANY MISREPRESENTATION OR MATERIAL OMISSION MADE BY ME ON THIS APPLICATION WILL BE SUFFICIENT CAUSE FOR CANCELLATION OF THIS APPLICATION OR IMMEDIATE DISCHARGE FROM THE EMPLOYER'S SERVICE, WHENEVER IT IS DISCOVERED.

I GIVE THE EMPLOYER THE RIGHT TO CONTACT AND OBTAIN INFORMATION FROM ALL REFERENCES, EMPLOYERS, EDUCATIONAL INSTITUTIONS AND TO OTHERWISE VERIFY THE ACCURACY OF THE INFORMATION CONTAINED IN THIS APPLICATION. I HEREBY RELEASE FROM LIABILITY THE EMPLOYER AND ITS REPRESENTATION FOR SEEKING, GATHERING AND USING SUCH INFORMATION AND ALL OTHER PERSONS, CORPORATIONS OR ORGANIZATIONS FOR FURNISHING SUCH INFORMATION.

THE EMPLOYER DOES NOT UNLAWFULLY DISCRIMINATE IN EMPLOYMENT AND NO QUESTIONS ON THIS APPLICATION IS USED FOR THE PURPOSE OF LIMITING OR EXCUSING ANY APPLICANT FROM CONSIDERATION FOR EMPLOYMENT ON A BASIS PROHIBITED BY LOCAL, STATE OR FEDERAL LAW.

THIS APPLICATION IS CURRENT FOR ONLY 60 DAYS. AT THE CONCLUSION OF THIS TIME, IF I HAVE NOT HEARD FROM THE EMPLOYER AND STILL WISH TO BE CONSIDERED FOR EMPLOYMENT, IT WILL BE NECESSARY TO FILL OUT A NEW APPLICATION.

IF I AM HIRED, I UNDERSTAND THAT I AM FREE TO RESIGN AT ANY TIME, WITH OR WITHOUT CAUSE PRIOR TO NOTICE, AND THE EMPLOYER RESERVES THE SAME RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE PRIOR TO NOTICE, EXCEPT AS MAY BE REQUIRED BY LAW. THIS APPLICATION DOES NOT CONSTITUTE AN AGREEMENT OR CONTRACT FROM EMPLOYMENT FOR ANY SPECIFIED PERIOD OR DEFINITE DURATION. I UNDERSTAND THAT NO REPRESENTATION OF THE EMPLOYER, OTHER THAN AN AUTHORIZED OFFICER, HAS THE AUTHORITY TO MAKE ANY ASSURANCES TO THE CONTRARY. I FURTHER UNDERSTAND THAT ANY SUCH ASSURANCES MUST BE IN WRITING AND SIGNED BY AN AUTHORIZED OFFICER.

I UNDERSTAND IT IS THIS COMPANY'S POLICY NOT TO REFUSE TO HIRE A QUALIFIED INDIVIDUAL WITH A DISABILITY BECAUSE OF THAT PERSON'S NEED FOR A REASONABLE ACCOMMODATION AS REQUIRED BY THE ADA.

I ALSO UNDERSTAND THAT IF I AM HIRED, I WILL BE REQUIRED TO PROVIDE PROOF OF IDENTITY AND LEGAL WORK AUTHORIZATION.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_